

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X400

Based on an inspection this day, the item(s) noted below identify violations of <u>410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.</u>

The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishm			4 .1 .	Telephone Number	Date of In (mm/dd/yr	spection r)	PERMIT#
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			mber and street, city, state, zip code)		3/4/	20	l ' ' '
	woli Pika	<u>. </u>	Flyds Knobs, IN 47119		- ·	1 2 7 7	<u> </u>
Owner				Purpose:	Follow-u	* I	se Date
	<u> </u>			Routine	۳.		DAY
Owner's A	ddress			2. Follow-up	Summary of Violations:		
D	<u> </u>			3. Complaint	_	_	か
Person in C	¥ .			4. Pre-Operational	-Operational C_Z NC_Z R_		$R \cup R$
Responsible	Hurst		n	5. Temporary	Monu Tsu	na /Caa haal	of name
Responsible	e rersum's	C-EIIA		6. HACCP	Menu Ty	pe (See back	of page)
Certified F	ood Monag	O.F.		7. Other (list)	1, ,	2 V	_45
Certified F	Janele	7.	(9/15)		12		_43
En Richards (1/9/25)							
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative			To Be Co	orrected By
דרו	C		Observed raw stank stand beside and	over RTE		Core	rected
438	0		Observed (2) unlabeled churical sprayers Observed cases of single-use items stoned on Floor Corrected Corrected				
243	NC		Observed (2) unlabeled chemical sprayers Corrected Observed cases of single-use items stoned on Floor Observed low south gun with build-up Corrected				efed
297	NC		Observed low sada and will haritate	•		Corne	ted.
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Received by (name and title printed): James L. Hurst Received by (signature): James S. Hurst				Inspected by (name and title printed):			
اهد	nes a	<u>۷,</u>	HUrst	A.J.	Ingran	n (EHK))
Received by	(signature)): 	1	Inspected by (signature):	-		
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